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**FAX TRANSMISSION****DATE:** April 20, 2005**PTO IDENTIFIER:** Application Number 10/520,501

Patent Number

**Inventor:** Graham Hodgson et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (703) 872-9306**FROM:** RADER, FISHMAN & GRAUER PLLC

Michael B. Stewart

**PHONE:** (248) 594-0633**Attorney Dkt. #:** 66221-0035**PAGES (Including Cover Sheet):** 11**CONTENTS:**Amendment  
Amendment Transmittal (1 page - in duplicate)  
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PTO/SB/97 (09-04)

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Application No. (if known): 10/520,501

Attorney Docket No.: 66221-0035

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Amendment

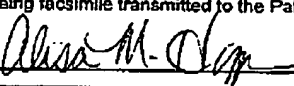
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<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. 66221-0036	
Application No. 10/520,501		Filing Date June 27, 2003		Examiner Not Yet Assigned	
Applicant(s): Graham Hodgson et al.					
Invention: FLUORINE CELL					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	21	- 20 =	1	x 50.00	50.00
Independent Claims	3	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					<b>50.00</b>
<input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>18-0013</u> in the amount of \$ <u>50.00</u> . A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>18-0013</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Michael B. Stewart Attorney Reg. No.: 36,018				Dated: <u>April 20, 2005</u>	
RADER, FISHMAN & GRAUER PLLC 39533 Woodward Avenue Suite 140 Bloomfield Hills, Michigan 48304 (248) 594-0633					

Amendment Transmittal

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Dated: April 20, 2005      Signature:  (Alisa M. Haggemo)

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